DOCUMENT RESUME

ED 246 131 UD 022 883

AUTHOR Madrigal, Stasia, Ed.
TITLE Field Problems in the South Bronx.
INSTITUTION Fordham Univ., Bronx, N.Y. Hispanic Research Center.
PUB DATE 83
NOTE 16p.
PUB TYPE Collected Works - Serials (022) -- Reports - Descriptive (141)
JOURNAL CIT Research Bulletin; v6 n1-2 Jan-Apr 1983

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS Cultural Pluralism; *Data Collection; *Family (Sociological Unit); Family Attitudes; Family Environment; *Field Interviews; Hispanic Americans; Mental Health; *Puerto Ricans; *Research Problems; Social Services; Urban Environment; *Use Studies
IDENTIFIERS *New York (Bronx)

ABSTRACT

Articles in this issue of the bulletin of the Hispanic Research Center focus on the problems of collecting demographic and social data in the South Bronx. The introductory article summarizes the contents of this issue. The second (by Lloyd H. Rogler, Osvaldo Barreras, and Rosemary Santana Cooney) is based on the experiences of field workers conducting an intergenerational family study. It describes how interviewees' distrust was mitigated by employing bilingual, culturally adaptable interviewers. The third article (Field Problems in a Multiethnic Survey of Fordham-Tremont Residents...," by Willian Burger) reports a different set of problems: physical safety, adhering to schedule, and White interviewees' biased distrust of minority interviewers. Recommendations made for coping include allowing a reasonably large amount of time for completing interviews, paying particular attention to the number and ethnicity of interviewers, surveying the study area in advance for crime incidence, and soliciting the assistance of neighborhood leaders. The fourth article (by Orlando Rodriquez) presents the preliminary results of the field study whose problems are discussed in the third. It examines the use of social and mental health services by Hispanic, Black, and White residents of the South Bronx. The fifth article ("Innovative Theoretical Formulations of Relevance to Critical Transitions in Family Development," by Yvonne Martinez Ward) describes aspects of the theories and conceptualizations of family research put forth by sociologist Reuben Hill at a seminar-workshop he conducted in 1982 at the Hispanic Research Center. (KH)

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RESEARCH BULLETIN
HISPANIC RESEARCH CENTER
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JANUARY - APRIL 1983

Vol. 6, No. 1-2

FIELD PROBLEMS IN THE SOUTH BRONX

The Hispanic Research Center (HRC) has long been committed to studying the effects of the sweeping social and economic changes experienced by the South Bronx and adjacent New York City areas on mental health issues relevant to Hispanic populations. These areas, however, because of their special demographic and social characteristics present certain problems to the field investigator. In this issue of the **Research Bulletin**, we focus on two studies conducted by the HRC in the South Bronx in order to present to the reader a discussion of the problems we encountered in the process of data collection. The first is a study of 200 intact Puerto Rican nuclear families, many of whom live in the South Bronx, which are intergenerationally linked into 100 parent and married-child families. Some of the preliminary findings of this study concerning ethnic identity in the Puerto Rican family and the social and cultural characteristics associated with Puerto Rican fertility were described in the January 1980 issue of the **Bulletin** (Vol. 3, No. 1).

The second study examined the need for and the utilization of social and mental health services by the residents of the Fordham-Tremont Community Mental Health Center catchment and adjacent areas in the South Bronx. Both the intergenerational and the utilization studies were conducted in environments—large urban areas—uncongenial to social research. Two of the articles in this issue discuss the ways in which the research teams of these studies coped with a variety of problems during the field stage of the research. The presentation of these experiences is intended as a contribution to an understanding of the problems specific to data collection in urban-based field studies and as a means of stimulating informed discussion on this neglected topic.

The first of the articles presented here, "Coping with Distrust in a Study of Intergenerational Puerto Rican Families in New York City," focuses on the problem of respondents' distrust of the interviewers. Distrust, the research team found, was mitigated by the presence of bilingual and bicultural interviewers who had a genuine interest in the Hispanic community, the opportunities given to skeptical interviewees to test the veracity of the research team's statements, the efforts to make the interviews enjoyable to the interviewee, the interviewers' adaptation to generational differences, and compliance with cultural amenities. This article originally appeared in the **Hispanic Journal of Behavioral Sciences** (Vol. 3, No. 1, 1-17, 1981) and is reprinted here because of its important contribution to issues associated with the increasing trend of data-collection problems.

The second article, "Field Problems in Multiethnic Surveys: The Experience of the Fordham-Tremont Residents Study," is a straightforward account of the problems encountered during the different stages of the HRC study on service utilization. This study faced the problem of conducting field research in a multi-ethnic population with varying socioeconomic levels; therefore, it poses different field problems from the intergenerational family study which focused on only one ethnic group.

The third article found in this issue, "A Profile of Services Utilization in the Fordham-Tremont Area," is a companion piece to the second article above, since both focus on the same utilization study. However, the third article presents to the reader the preliminary results of the study, a subject of interest to those of our readers who work with Hispanic service populations. It examines the use of social and mental health services by Hispanic, black, and white residents in an area of the South Bronx, in terms of five service populations: the disabled, the elderly, female heads of family, the unemployed, and the emotionally distressed.

The fourth article, "Innovative Theoretical Formulations of Relevance to Critical Transitions in Family Development," describes the salient aspects of a seminar-workshop conducted by Reuben Hill, Regents Professor of Family Sociology at the Minnesota Family Study Center, at the Hispanic Research Center. The article presents that distinguished scholar's theoretical orientation and innovative conceptualizations focusing on family research.

We would like to call the reader's attention to the fact that three of the authors who worked in preparing this issue of the **Bulletin**—Osvaldo Barreras, William Burger, and Yvonne Martinez Ward—are graduate students who have participated in the HRC's apprenticeship training program. The purpose of apprenticeship training is to encourage young promising scholars to participate in all phases of research projects as an in vivo learning experience. Assuming the responsibilities of authorship, we believe, is an integral part of this learning experience.

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COPING WITH DISTRUST IN A STUDY OF INTERGENERATIONAL PUERTO RICAN FAMILIES IN NEW YORK CITY

By Lloyd H. Rogler, Director,
Hispanic Research Center, and
Albert Schweitzer University Professor,
Fordham University

Osvaldo Barreras, Research Assistant,
Hispanic Research Center

Rosemary Santana Cooney,
Senior Research Associate,
Hispanic Research Center, and
Assistant Professor, Department of
Sociology, Fordham University

This article was originally published in the **Hispanic Journal of Behavioral Sciences** *(Vol. 3, No. 1, 1-17, 1981). Reprinted with permission.*

Field problems in research arise from the interplay between the requirements of the research design and the human context under study. If the design's requirements are undemanding and the study's context congenial to the intrusions of field research, then few data collection problems will arise; but if the design is demanding and the context uncongenial, field problems will emerge frequently and with great intensity. While other combinations are possible, it is the latter combination which affords the best opportunity to study the character and magnitude of data collection problems in current field studies. Our New York City study provides us with the opportunity of sharing with the reader the experiences of how one research team coped with pervasive distrust among respondents, a problem which threatened the study itself. The study applied a complex intergenerational family model to one minority group—the Puerto Ricans—with the requirement of lengthy interviews in a setting—New York City—uncongenial to social research.

The Need to Address Data Collection Problems

Although some attention has been given in recent years to the problems of collecting data in urban-based field studies, solutions to these problems have not been significantly advanced. Thus, in a conference in 1973 the American Statistical Association (1974) convened a group of well known social scientists and experienced researchers to explore the extent to which field research problems posed a threat to the continued use of surveys as a basic tool of social research. Some of the problems cited were the declining completion rates, the increasing cost of securing adequate completion rates, and the difficulties contemporary social change imposes upon survey studies. Among the social changes identified were those of the increasing urbanization of the population and accompanying changes in the population lifestyle; the rising concern with the invasion of privacy and fear of lack of confidentiality; the refusal to answer questions as a form of protest against some part or all of established society; and the growing expectation that research can or must play a more definite role in meeting rising expectations and solving the problems of the day.

If we take the completion rate of surveys, not as a topic of interest in itself, but as indicative of the magnitude of data collection problems, then trends over time are evident. At the American Statistical Association Conference, private survey organizations reported that in the seventies the average completion rate ranged from 60 to 65 percent, a marked decrease from the 80 to 85 percent average completion rate in the sixties.[1] In the same year as the conference, a study conducted in the Tremont area of the Bronx reported a completion rate of 56.4 percent.[2] A comparable completion rate was reported in another study undertaken in the Washington-Heights area of New York City.[3] An article in **Business Week**, also in the same year as the conference, reporting on a survey of numerous research companies, stated that, in general, door-to-door interviewing was becoming increasingly troublesome for researchers.[4] The article quoted a representative from the Gallup organization as stating: "... we feel that if we get 70 percent of the people after we have made four calls to find them, we are doing pretty well" (1973: 216-220). A still more recent report substantiates the problem. A ten-year analysis of non-response in the Detroit Area Study Surveys published in 1977 reported that the 20 percent nonresponse rate of the preceding ten years had now grown to 40 to 50 percent.[5] Thus, decreases in the completion rates indicate a rapidly escalating trend in data collection problems.

Carlson's words to the American Association of Public Opinion have an alarming ring to them: "We are able to collect our data only because the general public continues to be willing to submit to our interviews. This acceptance of us by the public is the basic natural resource on which our industry is built. Without it, we would be out of business tomorrow."[6] As sociologists, the authors, too, are concerned that sociology would be "out of business" if the public failed to cooperate. Of the academic disciplines, sociology is preeminent in basing its research upon large-scale field studies. In brief, there is a need to focus upon data collection problems.

The Problem of Distrust among the Respondents in the Study

It is in response to this need that we describe the procedures we used to cope with the distrust of persons we sought to interview in a study of intergenerationally linked Puerto Rican families in New York City. We believe these experiences are instructive because the research design was demanding and the New York City setting was uncongenial to research, circumstances which are revealing of field problems. First we will explain the study's design and then turn to the New York City setting of the study.

The intergenerational family model required that the 400 persons we interviewed had to: (1) be Puerto Rican by birth or parentage, (2) represent 200 husband-wife pairs, and (3) be grouped in husband-wife pairs linked to other husband-wife pairs as either parent or child—thus representing 100 intergenerationally linked families. Also, we wanted the families to exhibit sharp differences in socioeconomic status. To identify the families, we turned to the 1970 census and rank-ordered the census tracts in the Bronx with 400 or more Puerto Ricans according to the percentage of Puerto Ricans with a high school education. (The Bronx is the borough with the largest number and percentage of Puerto Ricans in New York City.) To secure families from different socioeconomic levels, field work focused upon the tracts at the top and at the bottom of the rank-order. In the tracts we identified eligible families by conducting door-to-door neighborhood surveys and visiting organizations. The families we interviewed were also asked if they knew other eligible families. Once a family fitting the intergenerational model was identified and cooperation secured, four persons were interviewed—mother, father, child, and child's spouse. (Since we did not start with a predesignated list of households or persons to be interviewed, we cannot compute completion rates.) More than twice the information was required from women than from men: the average interviewing time for women was five hours and forty-five minutes; for the men, two and one-half hours. The study's data collection phase required the labors of slightly more than five full-time field workers over a 23-month period from July 1976 to May 1978. Thus, the requirements of the study were demanding in terms of both the complexity of the criteria defining the study group and the length of interviews.

In addition to a demanding study design, the New York City setting of the study was uncongenial to research. In general, the larger the urban area, the more difficult the collection of data, if rates of nonresponse are taken as the measure. Robins' study of reluctant respondents in St. Louis found refusal rates to be higher for residents of the city as compared to those living in areas outside the city.[7] Dunkelberg and Day found that city size was the most important variable in ex-

plaining patterns of nonresponse: the larger the city, the higher the nonresponse rate.[8] Kohn reported that the larger the community, the more difficult it is to obtain long interviews from employed men.[9] Finally, the Survey Research Center of the Institute for Social Research at the University of Michigan reported that small towns and rural areas have consistently lower rates of nonresponse than more urbanized areas.[10] Our New York City study, therefore, applied a complex intergenerational family model to one minority group, with the requirement of lengthy interviews in a setting uncongenial to social research.

As early as the start of the study's one-year pretesting period, we became aware of the fact that even after a family was identified as fulfilling the intergenerational Puerto Rican family model, considerable effort was still necessary to secure the cooperation of the four persons in each intergenerationally linked family. The prevailing and most immediate obstacle was distrust. One field worker's initial experiences in interviewing Mr. Cuevas were typical. The field worker wrote:

> *Mr. Cuevas was a dry person who tried very much to keep his distance from strangers, including myself. He was very aware of what was written in the interview schedule and was trying to verify that the questions that I read to him were in fact written in the schedule. He was reluctant to participate in the study. I had to make several visits to his home and to telephone him several times in order to change his attitude.*

Mr. Cuevas' distrust was overcome or at least mitigated and the interviews completed. Distrust generally was evident not just in the interviewees' reactions to the field workers but as a common topic of conversation regarding the way Puerto Ricans change as a result of living in New York City. The topic usually arose when nostalgic memories of the warmth and hospitality of the people in Puerto Rico were contrasted with the situation in New York City. The interviews probed the topic:

> *"The circumstances in New York are different (from those in Puerto Rico). You can't trust people here."*
>
> *"When they come here, Puerto Ricans begin not to trust others. I guess they are afraid of having others take advantage of them."*
>
> *"When people come to live in this city, they become more suspicious of other people."*
>
> *"Life is harder in this city. After they move here people become more distrustful. If they trust too much, then others can take advantage of them."*
>
> *"Life in this country is different. Here one tries to help someone and later on that same person tries to take advantage of one."*

As a social pattern, distrust was both displayed and observed by the interviewees. It focused upon Puerto Ricans and non-Puerto Ricans. Thus, while collecting the data, interviewers were identified as welfare, sanitation, vice-squad, social security, medicare-medicaid, and tax inspectors; seen as investigators working for the police and landlords; and viewed as potential muggers, or thieves. One member of a small protestant denomination saw them as "agents of the devil."

Distrust was directed not only at the field workers but also at the type of information they sought to collect. Did they seek information on household composition? On migratory and employment history? On education, income, and age? In sociology, such information carries the neutral designation of being sociobiographical, but to the inner city resident, this information is not neutral. To divulge it could be prejudicial—even seriously damaging—to him or to her in relation to the regulations of apartment living; number of dependents reported for welfare allotments; board of health and fire department regulations; food stamp and medicaid or medicare regulations. If the divulgement of such obvious items of information could be prejudicial, why risk divulging other less public items of information? No allegations of guilt or breach of regulations need—or ought—to be made to understand that among inner city residents—not just Puerto Ricans—there are deep sensitivities associated with the reporting of information. Information is suppressed as a generalized and functional distrustful reaction to the conditions of urban bureaucratic life.

On the assumption, however, that there are always variable degrees of adherence to social patterns such as distrust, we pose the following question: Who were the persons in our study who displayed the most distrust? To answer this question we developed a Likert-type trust scale which contains seven items of the type: Children should learn that if they don't look out for themselves people will take advantage of them; you can only trust people whom you know well; it is not good to let your friends know everything about you, for they might take advantage of you.[11]

The answer to the question is that trust is related to generational status, the younger generation of married couples being more trustful than the older generation. Persons with higher levels of education were more trustful, as were those with a better knowledge of English. In addition, the younger generation had more education than the older generation, and a more advanced knowledge of English. We believe that the younger generation is more trustful than the older generation because they were exposed at an earlier age to the host society. Higher education and a better knowledge of English favor trust because they represent skills conducive to integration in the host society. Such skills are much more characteristic of the younger than the older generation.

At the time the study's data were being collected we did not, of course, know these findings. Retrospectively, however, they do coincide with the differences we experienced in contacting and interviewing the two generations, and with the adaptations which had to be made to cope with such differences. Thus, distrust was a general problem affecting field work, but the problem was more pronounced with the older generation. To allay the distrust and maximize the cooperation of the interviewee, we made decisions regarding the selection of interviewers, they way in which the interviewers were to identify themselves in the field, the approaches to be used in response to specific interviewing problems, and methods of adaptation to generational differences among the respondents.

Coping with Distrust

The Interviewer's Self Identification

The persons selected as members of the data collection team were Hispanic, both bilingual and bicultural. In recruiting members, persons who showed indications of distancing themselves emotionally and attitudinally from the Hispanic community were excluded, as were persons who subscribed to the view that research was an irrelevant and exploitative academic exercise carried out at the expense of inner city residents. Hispanics who have moved away from the inner city are sometimes viewed as having joined the world of the **blanquitos** (the diminutive word, scornfully used, for the color white), the Anglo world of the outgroup middle class. Seen as marginated from the ingroup and as divorced from Hispanic sentiments and experiences, such persons are treated with sharp distrust. Because the members of the field team were middle class—in terms of background, educational level, dress, appearance, and comportment—their interest in the Hispanic community had to be honest and abiding, if distrust was to be allayed. In the quick give-and-take of repeated interviews, the absence of such interest cannot be disguised or feigned. Lack of interest creates difficulties in securing the cooperation of respondents, presents obstacles to interviewing, and threatens the participation of the interviewee in the study. Indifference to the Hispanic community also makes it difficult for the interviewer to confront the daily vicissitudes of field work. The same problems exist when the field worker does not believe in the value of research. The field workers had to be emotionally committed to the Hispanic community and to the research.

To many of the interviewees, the linkage between ethnicity and research in the form of an Hispanic interviewer, associated with a university widely recognized in New York City, was incongruous but gratifying. In addition to the status conferred by being associated with a university, the fact that there were Hispanics attempting to understand the Puerto Rican experience as an outgrowth of the ingroup's concern with **nuestra manera de ser** (our way of being) was a source of satisfaction. To satisfaction was added ease of communication because the interviewer's bilingual skills provided the interviewee with the opportunity to pick the language in which he or she felt more comfortable.

The Selection of Interviewers

The interviewers selected received a one-month sequence of group training sessions which included an examination of the study's procedures and objectives, the discussion of relevant literature, role playing in simulated interviews with "different" respondents, and the observations of the more experienced interviewers in actual field work. Decisions were then implemented regarding the way the interviewers were to identify themselves, explain the study, and give assurances of compliance with the protection of human subjects. The interviewer's institutional affiliation was made clear, along with other information relevant to the identification. The interviewees were encouraged to check the veracity of our statements if skepticism was expressed. Expressions of doubt regarding identities and institutional affiliation were countered with the reply that we would be happy to provide transportation for the interviewee to visit our offices at the university or, if a visit was not convenient, to telephone our offices or homes or, if they wished, the project director would visit them or write them a letter on official stationery. We brought one family to our offices for morning coffee, answered innumerable telephone calls at all hours of the day and night at work and at home, wrote many letters affirming our identify and expressing our thanks for their cooperation. The invitation to check upon our authenticity as a means of allaying distrust had the manifest effect of corroborating what we said regarding our identity while conveying the latent meaning that we respected the interviewee's right to test our veracity.

In explaining the research, the interviewers made it clear that we were not there to study the psycho-social problems of alcoholism, drug addiction, crime, delinquency or educational "underachievement" (or what has come to be termed "deficit model" research). While recognizing the value of such research in documenting the magnitude and source of such problems, our questions focused on how Puerto Ricans struggle to survive in an environment such as New York, with many of them making notable advances in life career attainments. As the interviewees could see, our questions dealt with family structure, cultural values, coping procedures in response to problems, supportive networks, and educational and occupational attainment. The interviewees, living in a milieu which deprecates Puerto Ricans, saw in the Hispanic identity of the researchers and in the subject matter of the research something worthy of ethnic pride.

After the introduction and explanation of the research, and a statement of our willingness to work always at the convenience of the interviewee (whenever and wherever that might be), the interviewer verbally went step by step through the stipulations concerning the protection of human subjects: informed consent, voluntary cooperation, confidentiality of the data, the data protected under lock and key and to be used only for purposes of research, the respondent's freedom not to answer questions, and freedom also to withdraw from the research at any time (four families chose to withdraw from the research after the interviews had begun). At about the time the team was ready to begin interviews, a letter from one of the funding agencies pointedly raised questions about our seeking oral consent instead of written consent from the interviewees, and requested "... a methodological justification as to why you will not obtain written consent." In his reply to the letter, the senior author of this article, who was the study's principal investigator, indicated the type of relationship to be established with the respondents:

> *... Any and all questions raised by the subjects concerning the purpose of the research and its procedures will be answered with complete and absolute honesty.*
>
> *Over the years, in the research I have conducted in Puerto Rico and on Puerto Ricans in the United States, I have sought the subjects' verbal consent and the protection of their rights very much according to the type of assurances stated above. The assurances conveyed to the subjects were presented in the context of the humanistic, warm relationship we developed with them, always with full regard for their integrity and the respect we owed them. They believed in us, and we believed in them —all within the interpersonal normative system imbedded in Puerto Rican culture. We plan to conduct our field work on Puerto Rican families in New York City by establishing such a relationship with the subjects.*
>
> *It seems to me that if in this context the subject is presented with an officious document requesting his signature for* **written** *consent, an issue of trust is raised. It could prove offensive, perhaps even insulting, to the subject, implying as it does that neither his words nor those of the interviewer suffice in establishing mutual respect. Customarily, the medium of an agreement among Puerto Ricans is verbal.*

The funding agency accepted the explanation. In retrospect, had we been forced to secure written consent, the probabilities of conducting the study would have been minimal or non-existent. To ask an Hispanic interviewee to sign a fearsome-looking, complicated legal document would have breached the cultural amenities of interpersonal relations, and magnified many times over, to the point of being irresolvable, the problem of distrust already confronting us.*

Approaches to Specific Interviewing Problems

Through the 23 months of field work there were regularly scheduled staff meetings. The informal give-and-take among the team members while drafting field reports in the office provided an opportunity for sharing experiences in the field, defining problems associated with contacting and interviewing specific families, and developing procedures for coping with such problems. Group discussion focused upon specific instances of persons resisting cooperation and expressing distrust toward the field workers.

The first step in such discussions required that the interviewer report the problem and render a clear behavioristic description of how the respondent evidenced resistance and the social context in which the resistance was being expressed. The second step involved interpreting the resistance by means of a tentative hypothesis regarding the source of resistance. Was it distrust of our identity? Was the respondent involved in some clandestine rule breaking or illegal activity—such as distilling "pitorro" rum, trafficking in drugs, or violating the rules of welfare payments—and fearful of being uncovered? Or, was the respondent being pressured by someone else not to cooperate? This method enabled the team members to see if the hypothesis squared with the observations being reported and led to the third step, the development of ways to cope with the problem.

*Each nuclear family was paid $50.00 upon completion of the interviews. Such payments were given comparatively little emphasis in securing the respondent's cooperation because we did not want to base the relationship upon the pecuniary gain of the interviewee. The payment was presented with the explanation that the money was available in the budget for such purposes.

Broadly speaking there were two—not mutually exclusive—ways of coping with problems of resistance. One was to address directly the source of resistance. For example, we would speak to the person who we felt was advising the respondent not to cooperate in an effort to reaffirm our identity and demonstrate the legitimacy and value of our research. Or, we would make it a point to emphasize to the uncooperative respondent that we were not agents of the welfare or criminal justice system and encourage him or her to check upon the truth of our identity. Some respondents were persuaded, but the approach did carry the risk of attributing an incorrect source to the resistance then committing the error of aiming our efforts at an invalid target, all to the confusion of the respondent. Field workers, however, premised their approach to problems of interviewee resistance according to the causes they believed to be operative.

The other way of coping with resistance was indirect, for it did not make assumptions as to the source of resistance but attempted to increase the tone of pleasant interaction between the interviewer and interviewee while implicitly trying to get the resisting interviewee's cooperation. The procedure essentially is one of emphasizing the cultural amenities in social contacts—as will be presently discussed—while avoiding any sem-

blance of overt pressure. The interviewee knows what is wanted from him or her, and, once the bond of ethnicity and friendship is established, will likely volunteer cooperation without any further solicitation. This procedure attempted to enhance the interviewee's enjoyment of contacts with the interviewer so as to counterbalance resistance, whatever its source. In this approach, the field worker's personal skills and cultural attributes become methodological resources to be used in coping with field problems. We recommend that more attention be given to the possibilities of this approach in order to minimize the risk of error in attributing sources to resistance, and to avoid putting the respondent in an embarrassing or compromising position in relation to activities (clandestine or illegal) or persons (pressuring the respondent not to cooperate) that antedate the presence of the interviewer and are likely to remain a part of the respondent's life after the study has been completed.

Adapting to Generational Differences

The staff members' bilingual skills provided flexibility in adapting to generational differences according to the interviewee's most familiar language: Spanish was mostly or entirely used in interviews with 91 percent of the persons in the parent generation; English was mostly or entirely used in the interviews with 75 percent of the persons in the married-child generation. The generational difference in the use of language in the interview was related to more general patterns affecting the situation of the interview. As we have seen, the younger generation had a better mastery of English and more education than the older generation. The older generation, therefore, had less command over the functional skills which would have connected them more fully to the host society. For this reason, they were in general more distrustful than the younger generation. Thus, upon first contacting them, it was somewhat more difficult to secure their cooperation. In the subsequent interviews, the cultural amenities prescribing the tone, distance, and quality of the relationship between the interviewer and interviewee differed sharply according to generation.

First and foremost among the cultural amenities we obeyed while interviewing the parent generation was the form of address using the pronoun **usted** (or Señor or Señora, Don or Doña). **Usted** connotes respect, establishes an appropriate distance in the relationship, and is a formally correct way of addressing elders. Used with the parent generation, **usted** conveyed our view of the interviewee as a person in his or her own right, honorable and worthy. The use of **usted**, however, can rapidly become insulting if the interviewer's comportment does not match the indicated respect. This meant that the interviewee was not to be rushed, or rapidly scheduled through the sequence of interviews: if the interviewee was listening to a radio program or a favorite soap opera (**novelas**), the interviewer waited until the program was over. In using Spanish during the interview, an effort was made to avoid anglicisms that would sound alien and make the Spanish-speaking interviewee feel as if he or she was being left out. Finally, and consistent with the cultural concept of respect, the interviewer graciously accepted the hospitality offerings of the interviewees because not to have done so would have diminished the general intent of the act.

The enactment of the culturally prescribed amenities came naturally to the bicultural interviewers and it helped to establish an appropriate relationship between interviewer and interviewee. Also helpful in strengthening the underlying **ethnic** bond between the two was the spontaneous give-and-take of reminiscing nostalgically about the island-home (**añorar**). Puerto Rico's tropical weather, the food, the warmth of the people, the good times with friends and relatives at reunions, parties, and festivals are common topics of conversation. Such topics evoke the sharing of feelings associated with the loss of treasured objects while validating the common view among compatriots that in New York the socio-emotional well-being of Puerto Ricans has taken a sharp turn downward. Nostalgia toward the past becomes intertwined with hostility toward the present. The interviewer's bicultural background helped to gain and sustain the rapport required in the interviews with the parent generation. Of the two generations, the parent generation was more difficult to interview.

Although the interviewers shared occasional nostalgic memories regarding Puerto Rico with the young couples in the married-child generation, the prevailing topics of informal talk in these instances referred to the life cycle of the interviewees—how to raise children, husband-wife relations among the recently married, women's drive toward liberation—or to the contemporary Hispanic culture of New York City—how and where to dance the **salsa**, the city's annual Puerto Rican parade, the activities sponsored by compatriot organizations. Here there was no need for the formal **usted** or, for that matter, **Señor**, or **Señora**, **Don** or **Doña**. With less of an age and educational disparity between interviewer and interviewee in the married-child generation, the relationship was more fluid, informal—the form of address being **tu** (you)—and less structured. The research was more understandable to this generation, and the interviews took less time. Although English was the language used most often in the interview, Spanish colloquialisms were permissible, with some use also of hybrid "Spanglish" words. With this generation, the ethnic bond sustaining rapport between interviewer and interviewee was developed out of common experiences of being Hispanics in New York City, as such experiences were refracted through the prism of similarities in age and education. The bicultural background of the interviewers was, thus, important in both the married-child generation and the parent generation.

Were we then to describe the most prevalent modality in the interviewee's reaction to us throughout the sequence of interviews it would begin with distrust or resistance and end with some form of cooperation. The Borinquen family illustrates this modality. One interviewer reports her experiences with Mrs. Borinquen, a wife-mother in the parent generation:

> *The impression I had of Mrs. Borinquen when I first met her and the one I left with were quite different. When I first met her, she was very curt with Dolores (another interviewer) and me, telling me quite frankly that she had no time to spend with us as she was too busy ... Mrs. Borinquen seemed cold and impersonal. She is a reserved and cautious woman who takes time to know a person and size him or her up.*
>
> *During the second visit when I started the interviews, however, I was surprised: she was friendly and quite willing to cooperate. She became more relaxed, more personable, and volunteered information about her life. She called me "negrita" and the diminutive of other terms of endearment. At one point, she stopped the interview to show me pictures of her grandchildren. She adored them, affection being reflected in her face as she talked about them. She expressed concern that "niñas" like Dolores and myself would be interviewing at night in "bad" neighborhoods.*

The interviewee's reactions changed from treating the interviewer as unwelcome stranger to accepting her with terms of endearment, the sharing of family mementos, and solicitous expressions of concern for the interviewer's safety. The interviewer succeeded because she gained acceptance as part of the ingroup.

Conclusions

What did we learn that could be of use to other researchers undertaking similar projects?

First, there is a need to identify the nature of the field problems which impede data collection. Our problem was the pervasive distrust of interviewees. Others, too, have encountered the same problem. Thus, Josephson calls attention to the fact that some residents of inner city neighborhoods view research as useless and interpret it as "a form of exploitation by the investigators for their gain or for the gain of the institution and powers they serve."[12] Similarly, Cromwell, Vaughn, and Mindel[13] point to the following sources of resistance: the animosity or discontent created by some findings which have depicted minorities and low-income people in ways unappealing to them; the threats to individual and group privacy; the failure of outside investigators to consult with individuals and groups within the community being studied; and, the perception of research endeavors as "establishment oriented." Our ex-

periences, thus, were not unique.

Second, there should be an attempt to understand in appropriate theoretical terms the nature of the field problem. Thus, we did not look upon the distrust of our respondents as a psychiatric symptom evidencing mental illness or as an enduring psychological trait. Rather, by viewing distrust as a functional sociopsychological response to the conditions of urban life among persons with a language and culture different from those of the host society, we could understand why the older generation with less education and a weaker command of English were more distrustful than the younger generation. The absence of skills conducive to integration in the host society is an isolating force increasing distrust.

The third point appears to be almost self-evident once stated: decisions affecting field work should be premised upon an understanding of the problems which impede data collection. This advice raises skeptical questions about the general utility of lists of "do's and don'ts" in field work, and insists that attempted solutions to data collection problems be rooted in the theoretical understanding of the problems themselves. In our case, we attempted to put the interviewer into the respondent's cultural world and, at the same time, to encourage the development of primary social bonds between the two. Specifically, distrust was mitigated by the presence of bilingual and bicultural interviewers, who had an abiding interest in the Hispanic community; the inviting of the interviewee to test the veracity of what we said if skepticism was expressed; the efforts to make the interviews enjoyable to the interviewee; the interviewers' adaptation to generational differences; and compliance with cultural amenities.

We believe that insufficient attention has been given to issues associated with data collection even though there is consistent evidence of an increasing trend of data collection problems in urban-based field studies. Concerned researchers must address such problems if our understanding of society is to retain the vitality which field studies provide.

References

1. American Statistical Association. Report on the American Statistical Association Conference on Surveys of Human Populations. *The American Statistician* 1974, 28:30.
2. Thacker, C.M. Ethnic Change in the Urban Sub-Area: A Study of the Dynamics of Residential Mobility. Unpublished doctoral dissertation, Department of Sociology, Fordham University, 1973.
3. Nelson, D. Department of Political Science, Fordham University, personal communication, 1979.
4. *Business Week.* The Public Clams Up on Survey Takers. September 15, 1973, pp. 216-220.
5. Hawkins, D.F. *Nonresponse in Detroit Area Study Surveys: A Ten-Year Analysis.* North Carolina: Institute for Research in Science Publications, 1977.
6. Carlson, R.O. The Issue of Privacy in Public Opinion Research. *Public Opinion Quarterly* 1967, 31 (1): 1-8.
7. Robins, L.N. The Reluctant Respondent. *Public Opinion Quarterly* 1963, 27(2):276-286.
8. Dunkelberg, W.C. and Day, G.S. Nonresponse Bias and Callbacks in Sample Surveys. *Journal of Marketing Research* 1973, 10 (May):160-168.
9. Kohn, M.L. *Class and Conformity.* Chicago: The University of Chicago Press, 1977.
10. Hawkins, *op. cit.*, Note 5.
11. Kahl, J.A. Some Measurement of Achievement Orientation. *The American Journal of Sociology* 1965, 70(6):669-681.
    Rogler, L.H. *Migrant in the City: The Life of a Puerto Rican Action Group.* New York: Basic Books, 1972.
12. Josephson, E. Resistance to Community Surveys. *Social Problems* 1970, 18(1):117-129.
13. Cromwell, R.E.; Vaughn, E.C.; and Mindel, C.H. Ethnic Minority Family Research in an Urban Setting: A Process of Exchange. *American Sociologist* 1975, 10(August): 141-150.

FIELD PROBLEMS IN A MULTIETHNIC SURVEY OF FORDHAM-TREMONT RESIDENTS IN THE BRONX

By William Burger
Research Assistant
Hispanic Research Center

Data-gathering in urban inner-city areas can be one of the most difficult prospects faced by researchers. In addition to the low rate of cooperation as documented by the American Statistical Association for all ethnic and economic groups, inner-city researchers are faced with another series of obstacles which hamper research.[1] The main problems most frequently encountered include distrust on the part of community residents, the safety of field workers, and the accessibility of possible respondents. This report focuses upon some of the problems that we faced in conducting a research project in the Bronx, New York, and the attempts we made to overcome these obstacles. We also present a series of recommendations based upon our experiences in the field which future researchers may want to consider before implementing the data-gathering phase of their research.

The Hispanic Research Center, in collaboration with Fordham-Tremont Community Mental Health Center's Hispanic Access Project, conducted a study of the utilization of health, mental health, and social services among residents of the South-Central Bronx. The preliminary findings of this study are reported in the next article written by Orlando Rodriguez. The study was aimed at discovering the extent of actual utilization of a broad spectrum of services among black, Hispanic, and white residents of the area. The field work began in June 1981 and was completed in December 1981. At the busiest time, fourteen persons, most of whom were fluent in both English and Spanish, comprised the interview team. Interviews were conducted in the language preferred by the respondent.

The sample for the study was drawn from residents of a mental health catchment area in the South Bronx and from a surrounding area in the northwest Bronx. Respondents were selected through a multistage sampling procedure. In the first stage, 25 blocks were randomly selected, with probability proportionate to the size of the Hispanic population in those blocks. We canvassed every third household in the selected blocks, starting with a randomly selected dwelling unit in each block. If the occupants of the first unit refused to cooperate in the study or were not at home, we contacted the next dwelling unit. If contact was made with a member of a household, we then solicited basic demographic information about all members of the household and asked for their permission to return at a later date to administer the survey instrument. There were 1160 households on the blocks selected for study. We were able to contact and obtain permission to return at a later date from 673 households, that is, 58 percent of all selected households. In the final sampling phase, we selected two out of three Hispanic households, one out of two black households, and all white households. The total number of respondents was 381, of whom 217 or 57 percent were Hispanic; 87 or 23 percent were black; and 77 or 20 percent were white.

Two distinct areas were surveyed. The first comprised the Fordham-Tremont Community Mental Health Center (CMHC) catchment area. The second comprised several adjacent health areas which contributed a significant number of clients to the Fordham-Tremont CMHC. The ethnic breakdown for the catchment area, according to 1980 Census data, was 70 percent Hispanic, 27 percent black, and 4 percent white. This area is composed of large numbers of uneducated, poor individuals. Respondents outside of the catchment area were 45 percent Hispanic, 19 percent black, and 36 percent white. This population had a higher socioeconomic level and a larger number of white respondents.

These economic and ethnic differences between the catchment area and its environs resulted in problems which were particular to each of the areas. As will be seen later in this paper, in attempting to solve a problem in the catchment area we created another problem outside of that area. This paper is divided into three sections. The first describes the selection and training of the interviewing teams, a process which was intended to lessen the problem of community distrust of research as described by Rogler et al. in this

1. American Statistical Association. Report on the American Statistical Association Conference on Surveys of Human Populations. *The American Statistician*, 1974, 28:28.

issue. The second and third sections of the report describe the specific problems that were encountered in the catchment area and those in the area outside of it.

Selection and Training of Interviewers

We attempted to hire interviewers who lived within the catchment area under the assumption that they would have intimate knowledge of the area and would be able to lessen community distrust toward the project. Criteria for hiring included that the interviewers be fluent in both English and Spanish. Three of the original six interviewers—two women and one man—resided in the Fordham-Tremont CMHC catchment area. The other interviewers were recruited from area colleges. Interviewers were instructed in the purpose and methods of the study, including the fact that all information gathered would be used only for statistical purposes and that all such information would be kept strictly confidential. The interviewers were thus able to explain this to the respondents and allay their fear that this type of information would be disclosed.

In both screening and interviewing procedures, we made special efforts to respect the amount of time the respondents were able to give us and the cultural customs of the respondents. For example, we were often asked to have lunch or dinner with respondents and we accepted this type of offer if made. We also attempted to locate neighborhood gathering places, such as stores, clubs, etc., in order to inform the neighborhood's key individuals that we were in the area and to elicit their assistance in lessening community distrust of the interviewers. All interviewers were instructed about the necessity for proper attire, the value of punctuality, and the monitoring of their field visits by follow-up contacts.

Each interviewer was furnished with a map of the block he or she was to screen and on which the interviewer would subsequently conduct interviews. The maps were a detailed pictorial representation of the buildings found on each block. Interviewers, however, reported certain changes that they found in the field, such as recently abandoned buildings. Each interviewer was given a packet of leaflets and instructed to place a leaflet under the doors of respondents who were not at home when we called. The leaflets, printed in English and Spanish, informed the residents that we had attempted to contact them about participating in the study, and that we would return at a later date to seek their cooperation.

In order to maximize the time available for both screening and interviewing, the interviewers worked in staggered shifts. Some interviewers worked from 10 a.m. to 6 p.m. and others, from 12 to 8 p.m. We also scheduled work on Saturdays to ensure that no group of residents would be overlooked for having been absent from the household during working hours.

During the screening procedure we were able to obtain agreements for interviews from a large number of respondents. At the same time, we were able to familiarize ourselves with the community and to lessen distrust toward the research. However, it was in the screening process that we started to discover some of the problems that were to plague the project from that point forward.

Problems in the Catchment Area

The problems we encountered during the field work in the catchment area can be divided into two kinds: the physical safety of the interviewers and lack of access to respondents due to absence of telephones and failure to keep appointments.

The physical safety of the interviewers was a major concern to all involved in the project. The catchment area has a high rate of crime and drug addiction. One police precinct in the area reported more than 400 incidents of crime for every 1000 residents during 1982. The first thing we did to address this problem was to contact the public affairs officers at the precincts in which we would be working to inform them that our researchers were in the field and that they would be carrying identification. This was necessary to prevent misunderstanding on the part of police on patrol as to what the interviewers were doing coming in and out of buildings in the neighborhood.

We decided that the method that allowed for the highest degree of safety for the interviewers was for them to work in teams. Each team consisted of one male and one female, not only for reasons of safety, but also because it was thought that the presence of a woman on the team would lessen the potential respondent's fear of opening the door for a single male. This approach, although ensuring a high degree of physical safety, greatly slowed down the field work, since while one person conducted the interview the other team member was forced to sit by idly. Although we did attempt to occupy the nonactive interviewer's time by having him or her take notes on the interaction between the respondent and the interviewer, these observations were of little practical value since the observer and the interviewer invariably reported similar impressions.

In order to balance the necessity for safety with the efficient utilization of interviewer time, a compromise solution was reached. Both team members were to approach an apartment where the resident had agreed to be interviewed. If the resident was at home and was a female, the female team member would conduct the interview, while the other team member would attempt to locate another respondent in the same building. If he was successful, he would return to the apartment where the female team member was and inform her of his whereabouts. They would meet after the interviews were completed and continue the procedure for the next series of interviews.

However, even this procedure did not ensure the complete safety of the interviewers. On one block which had been selected and later had to be eliminated because of the danger it represented to the interviewers, the team members were approached and asked to purchase heroin by a man carrying a handgun. On another day on the same block, the interview team was again approached by an armed individual and asked to purchase drugs. Upon our querying one interviewer who lived in that neighborhood, we discovered that to his knowledge there had been four drug-related homicides on that block within the last few months. For this reason, we moved from this block and selected another within the same census tract.

On another block in the catchment area, the interview team had bricks thrown on them from various directions. On the opposite side of the street was a Hispanic motorcycle gang. After we explained our purpose to the gang, we no longer had bricks thrown at us. We do not believe that the gang was responsible for the brick-throwing, but they undoubtedly spoke to those responsible and this action ceased.

On another occasion, one team member, a female, was conducting an interview in one room, while in the other room a **santería** session was being conducted in which, at one point, the respondent joined. (**Santería**, an Afro-Caribbean religion, holds that departed spirits communicate with mortals usually through a medium during abnormal mental states or trances.) The respondent subsequently had a hysterical attack which greatly unnerved the interviewer. On still another occasion, one interviewer conducted an interview with a women who had been beaten by her spouse. The respondent was fearful that her spouse would return and hurried to complete the interview. When the interviewer was leaving the apartment, the spouse returned and attempted to take the schedule from the interviewer. She resisted and fled from the apartment, running down the stairs with the husband in hot pursuit. Upon reaching the street, the husband gave up the chase, leaving the interviewer and the schedule intact.

Another female member of the staff was assigned to interview a woman in one apartment. Upon her arrival she realized that the woman in question was engaged in the sale of narcotics. Not wanting to lose the respondent, but apprehensive about conducting the interview in her apartment during a narcotics transaction, it was agreed that the interview would be conducted on the stairs in front of the house. The interview went smoothly, except for numerous interruptions by the respondent's colleagues who were concerned both about the interviewer's identity and about the supply of narcotics in the neighborhood. We believe that we were extremely fortunate that the police were not conducting a narcotics sweep at that time, thus giving us an opportunity to obtain a completed schedule. Prior to the interview and after its completion, sweeps were in fact conducted.

In general, the measures taken to ensure the physical safety of the interviewers—informing the police of our presence in the neighborhood and conducting the interviews in teams of one male and one female—proved to be successful, since apart from a few cases

of shaken nerves, the project suffered no casualties.

The second problem we faced within the catchment area was gaining access to respondents who had no telephones and who missed appointments. We estimated that on the most economically depressed blocks between 40 and 50 percent of all households in which a member consented to be interviewed did not own a telephone.

As a result, we found it extremely time-consuming to make appointments. Although during screening we elicited from each person contacted a convenient time for us to conduct the interview, we had to make repeated visits to their homes because we were unable to confirm appointments by telephone. And once appointments were made and confirmed, we found that in approximately 40 percent of all cases respondents failed to keep appointments. This entailed making numerous visits to respondents and caused delays in the field work that placed us behind schedule.

Because a large number of respondents did not have telephones, interviewers were forced to walk long distances to arrange for needed transportation. Frequently, the interview teams who needed transportation from one site to another had to be kept waiting anywhere from 10 minutes to an hour. If the project director and field coordinator were already away from the office moving another team, sometimes an hour passed before we were able to contact the office and pick up the second team for transportation.

Access was initially denied by many respondents who were reluctant to reveal information about household composition and sources of income, since this is information which is of use to the Welfare Department. As mentioned earlier, we advised interviewers to explain to respondents that all information would be confidential and that this information would be reported only in terms of group statistics. With only a few exceptions, once our interviewers were able to explain how this information would be collected and reported, respondents were willing to provide the necessary data. In general, respondents in the catchment area showed less distrust than we had originally anticipated. This was due, in large measure, to the fact that the interviewing team was composed of bilingual, minority individuals. This, as we shall soon see, created a problem when we began field work outside the catchment area.

Problems Outside the Catchment Area

The population in this area was racially mixed with a large percentage of non-Hispanic residents. Safety was not a problem in this area but we did experience loss of respondents due to the distrust manifested in the white population and, paradoxically, because of the ethnic composition of the interviewer teams.

Distrust was the first major problem that we faced. Potential respondents were fearful of allowing us into the building and, if admitted, interviewers found it difficult to obtain consent to return and conduct the interview. Residents in this area refused either to open their doors to us or to participate in the study. The interviewers that we had hired were all minority individuals, an evident advantage in the catchment area, where the majority of potential respondents also belonged to minority groups. However, the ethnic composition of the interviewers was a distinct disadvantage in this area, where the majority of potential respondents were white. As a result of this and because of the large number of crimes that have been reported in this area, the residents were afraid to open their doors.

On one occasion, we scheduled an interview which was successfully completed. However, we later learned on the same day that prior to the interview the interviewee had become suspicious of the interviewer and of what she thought may have been an occasion for a crime. As a result of this suspicion, she had notified the police. Thus, while our interviewer was completing the schedule in one room, two police officers were lying in wait in the next room in anticipation of a criminal act. This distrust decreased the number of respondents that we were able to interview.

Another problem encountered outside of the catchment area was access to potential residents. While we found that the residents of the area distrusted members of our team, an indication of the general level of fear in the community was the fact that all of the entrances to the buildings were locked.

On one block we were able to screen only two of three buildings. When we entered the third building we were asked to leave by the owner of the building. The reason he gave us was that he had just purchased the building and was in the process of instituting eviction proceedings against various tenants. He thought that if we were involved with any of the tenants, they would be able to resist his efforts with our assistance. We informed him that our role was not to assist the tenants or to act as their advocates, but merely to ascertain their knowledge of services. He still insisted that we leave his building which we finally did. Fortunately, there were still enough respondents in the remaining two buildings to allow us to retain this block in our survey.

After examining the inadequate number of white respondents yielded by the screening, we decided that more aggressive measures had to be taken to gain access to respondents. The first measure was to go to each of the apartment buildings and locate the names listed on either the mailbox or doorbells. After this was completed, we attempted to locate phone numbers of these people through the assistance of the phone book and telephone information. When we had received the phone numbers of possible respondents, we called them and attempted to arrange an interview. This technique was not as successful as we hoped and yielded few interviews.

In addition, we found difficulty in obtaining a sufficient number of respondents as a result of the large population of working-class inhabitants in this area. Therefore, we decided to canvass the residents as they left for and returned from work. One block in particular where we could not gain access due to locked doors contained a building that had over 300 families. To contact the tenants of this buiding, the project staff and several interviewers stationed themselves in front of the building and contacted the respondents as they left for work in the morning and as they returned in the late afternoon in an attempt to secure interviews. This approach yielded modest results.

We realized that to obtain a representative sample of senior citizens who were members of minority groups, we would have to contact a senior citizen center. We contacted the administrator of one such center and he gave us his consent to talk to possible respondents at the center. This senior citizen center provided us with respondents who lived in areas not originally in the sampling frame but who were of ethnic and economic backgrounds similar to those who resided in the catchment area. This technique was successful in enabling us to increase the number of senior citizens from minority backgrounds in our sample.

Another technique we used to overcome both the problems of access and distrust was the hiring of a white interviewer. As mentioned earlier, many potential white respondents were afraid to open their doors to a minority-group interviewer. By hiring a white interviewer we were able to increase the number of white respondents to a level that was necessary for the analysis.

Conclusions

Our field problems in obtaining a multiethnic sample that cuts across various class lines illustrate one of the central problems which investigators must confront: the distrust of research and researchers by community residents. As documented by the American Statistical Association (ASA), response rates are declining.[2] Indeed, Rogler et al., in their article found in this issue, point to the issue of distrust as one of paramount relevance to the decline noted by the ASA.

The distrust that we encountered in the catchment area and that which we faced outside of that area were essentially of a diffeent nature, as were the methods we used in an attempt to overcome these problems in the two areas. In the catchment area the distrust among community residents was centered principally on the type of information that we sought. Questions dealing with sources of income and the number of persons residing in the household could potentially be damaging to the respondents. We attempted to overcome this type of distrust by hiring interviewers of the same ethnic background as the respondents. Since this area is predominantly black and Puerto Rican, our interviewers were also black and Puerto Rican. However, once we left the catchment area and moved into its environs, the inter-

2. *Ibid.*

viewers who had been well accepted in the catchment area found themselves greeted with suspicion, fear, and hostility on the part of a more racially mixed population. Thus, what turned out to be a solution for distrust in the catchment area became a problem of distrust outside of it.

The second basic problem we encountered focused on the physical safety of the interviewers in the catchment area. As with the problem of distrust, measures were taken in an attempt to overcome the obstacles faced, e.g., having the interviewers work in teams of one male and one female. In this area also, we were faced with the problem of non-reachability of respondents due to their lack of telephones and failure to keep appointments.

Outside of the catchment area, in addition to the problem of distrust of minority-group interviewers, as mentioned above, we had to cope with the inability of interviewers to secure entry into buildings. Here again, we attempted to ackle this problem with aggressive measures.

Based upon the experiences we acquired in this study, we offer the reader the following recommendations in undertaking a multiethnic sample across class lines in an area similar to the South Bronx. We suggest that these recommendations be incorporated into the planning stage of research that attempts to obtain this type of sample.

1) Due to the problems of safety, distrust, and access, we found that it was reasonably possible to conduct two interviews per day per interviewer. Interview time was as short as 1 hour 15 minutes in some cases and as long as 5 hours in other cases. This large range of time can also be attributed to the conditions under which the interviews were conducted. For example, some times we were asked to accompany respondents to local stores or to assist them in tasks such as helping them to fill out applications for food stamps. As a result of these unforeseen circumstances, the amount of time necessary for the completion of field work may be longer than originally planned.

2) Particular attention should be given to the number and ethnicity of the interviewers. For example, black Hispanic respondents should preferably be interviewed by black Hispanic researchers; white respondents should preferably be interviewed by white researchers. Because we were primarily interested in analyzing a Hispanic population, we did not hire a non-minority interviewer early in the project. This was one of the principal reasons for the relatively low number of respondents obtained during the screening phase of the project. After we hired a white interviewer the number of white respondents increased markedly. In obtaining a multiethnic sample across class lines, such as we attempted to do, interviewers should be representative of all the groups that are to be contacted.

3) Interviewer hours of work should be staggered so as not to miss any significant group in the sample area. Work should also be scheduled on weekends.

4) Prior to sending interviewers into the field, a complete survey should be conducted of the area to include instances of crime reports from the police department and contact with youth gangs or clubs to explain why the interviewers are in the area in order to dispel any animosity on their part. In our research, we originally selected one block which contained a school yard. We later discovered that drug traffic in this school yard was particularly high. Because of the level of drug traffic and the high number of drug-related crimes reported by the police on that block, we selected an adjoining block which had a similar ethnic and income level and, thus, avoided entering that particularly hazardous area.

5) Prior to entering the field, neighborhood centers such as churches, community organizations, etc. should be contacted and the assistance of the person in charge solicited. This person should be informed of the purpose of the study and asked to provide the names of individuals who have knowledge of the blocks that have been selected. One or more persons who know specific blocks should be hired to conduct the canvassing and, if possible, the interviewing. Hiring a person from the block that has been selected will lessen the problem of distrust and facilitate access to possible respondents.

6) Our field work experience casts some doubt upon the validity of the claims of those researchers who utilize random digit dialing. While this technique may be appropriate in studying the working poor and the more affluent members of society, our experience demonstrates that random digit dialing is not useful in studying the lower socioeconomic classes in U.S. society. Nearly 50 percent of the residents in large areas of the South Bronx, we found, do not have telephones. Random digit dialing misses the households in this type of area. Field interviewing, despite all the obstacles described in this paper, is the only method which can answer our questions in these areas.

A PROFILE OF SERVICES UTILIZATION IN THE FORDHAM-TREMONT AREA: PRELIMINARY REPORT

By Orlando Rodriguez
Research Associate
Hispanic Research Center

Social scientists and service providers acquainted with the situation of Hispanics in the United States have argued that Hispanics are less likely to use social and mental health services than other ethnic groups. While a modest body of research over the last two decades suggests that Hispanics in fact do utilize mental health services less than other ethnic groups, a recent critical analysis of this literature in the Hispanic Research Center **Bulletin**[1] indicates that (1) very few studies compare Hispanic use of mental health services in relation to other ethnic groups, and (2) few research studies have included objective indicators of the need for mental health services, that is, measures of mental illness against which the utilization of mental health services may be measured. As a preliminary step toward ethnically comparative research which measures utilization in relation to objective indicators of need, this report profiles the need for and the use of mental health services among psychologically distressed Hispanic, black, and white residents of the Fordham-Tremont area of the Bronx, New York.

In addition to mental health services, Hispanics need and use a broad range of social services for the elderly, the disabled, the poor and other disadvantaged groups. Yet, in comparison to our knowledge of Hispanic utilization of mental health services, little is known about how Hispanics use other social services designed to enhance and provide basic support to disadvantaged individuals in our society. This study was designed to begin to provide interested social scientists and practitioners with basic information about the needs for and the use of a broad range of social services among Hispanics and other ethnic groups in the Fordham-Tremont area, a major sector of the South Bronx. Specifically, the report profiles the need for and the use of services for the disabled, the elderly, female heads of family, the un-

1. Rogler, L.H. et al. A New Conceptual Framework for Mental Health Clinical Service Research on Hispanic Populations. *HRC Research Bulletin*, Vols. 4 & 5, Nos. 4 & 1, 1981-1982.

employed and the emotionally distressed among Hispanic, black, and white residents of the Fordham-Tremont area.

The study is the result of a subcontractual arrangement between the Hispanic Research Center (HRC) and the Fordham-Tremont Community Mental Health Center. Under this arrangement the HRC undertook to conduct research on the utilization of services by Hispanics as a contribution to the Hispanic Access Project funded by the U.S. Department of Health and Human Services. This project is one of eight nationwide demonstration projects to develop innovative service delivery approaches to the problem of Hispanic utilization of social services. The research component of the study explored several facets of utilization: need for services, uses of services, applying for services not received, reasons for not applying, problems in applying and receiving services, and referral sources. This report focuses only on the need for and the use of specific services; other facets of the utilization question will be examined in a later report.

The profile which follows is based on a survey of 381 households randomly selected from the effective catchment area of the Fordham-Tremont Community Mental Health Center. Characteristics of this area, as well as the field problems we encountered during the research process, are described in detail in the preceding article by William Burger.

In general, we found that each ethnic group in the area has a distinctive socioeconomic and demographic profile. Hispanics are younger, less educated, more likely to be living in female headed families, less residentially stable, poorer and more likely to depend on public assistance for income, and mostly born outside the United States. Blacks are also poor, but less dependent on public assistance and, on the average, older than Hispanics. Whites are, on the average, the oldest group in the area, and the most educated and affluent group, although not affluent by national standards.

The data presented below are based on two different units of observation: the respondent and the household. For example, age and sex data refer to the respondent, while family structure and income data pertain to the household characteristics. This information is labeled accordingly in the profiles. All ethnic group differences in the background characteristics are statistically significant at the .01 level, that is, there is a one in a 100 probability that the findings are spurious due to sampling error. By convention, sample group differences found significant at the .05 level or lower are considered reliable descriptions of group differences in the population.

Need for and Use of Services

We examine the utilization of services among each of five service populations: the disabled, the elderly, female heads of family, the unemployed, and people with emotional problems. For each group, we inquired about the need for and the use of a set of specific services. For example, with respect to the disabled we asked about the use of employment counseling, transportation, and other services specifically available for disabled people. The services we examined were selected after conversations with service providers in the area who mentioned the types of services most needed by the different populations.

Respondents were asked about their own and household members' need for a specific set of services only when at least one household member fulfilled the criteria for that service population. We illustrate with the example of the disabled and then list the criteria for the other four service populations examined in this study.

With respect to the **disabled**, all respondents were asked the following question: "Is there anyone who lived in your household in the past year who has a special problem that prevents him or her from carrying out things like work, housework, or schooling; for example, loss of hearing, loss of sight, loss of speech, or others?" Only if the respondent answered "yes," was he or she asked questions about the need for and the use of specific services for the disabled. Interviewers were instructed to emphasize the inability to carry out normal activities when asking the above question. However, interviewers were also instructed to accept any positive response and ask the questions about need and use of services. Subsequently in editing, the staff weeded out answers to the disability questions which showed that the household member in question was carrying out normal activities.

The selection criteria for the other service populations were as follows:

The elderly. Any person over the age of 59 who had lived in the household at any time within the 12 months prior to the interview.

Female heads of family. Any female household member who was no longer living with the father of her children. Included were some women with children living with men who did not regularly contribute income to the household.

The unemployed. Any household member over the age of 18 not in school and unemployed for more than one month. Female heads of family and retired persons were excluded, but non-working housewives were included.

People with emotional problems. Members of households in which the respondent answered "yes" to the question, "At one time or another, almost everybody has an emotional problem, for example, feeling angry all the time, or feeling low often, or fighting with friends and relatives over little things, or feeling worried all the time. In the past 12 months, did you or anyone in your household have any emotional problems?"

In this report, ethnic group differences found to be statistically significant at the .05 level or lower are identified by using the term "significant" in describing them. When the term "significant" is not used, the reader could interpret the findings only as suggestive of group differences; or the wording will clearly show that no group differences were found.

The Disabled

Approximately one out of four households surveyed have at least one disabled person. Among the most common disabilities reported are (in descending order of importance): paralysis or loss of limbs, arthritis, internal organ dysfunctions other than heart disease, substance abuse, hearing problems, and circulatory and heart problems. We believe that respondents significantly underreported substance abuse. Overall, disabilities related to sense and motor functions were the most commonly reported. White households were most likely to report these and Hispanic households the least likely. Substance abuse and mental illness were more frequently reported among Hispanic households than among the others.

No respondent in white households reported internal function disabilities in spite of the higher percentage of elderly in the white sample. It must be remembered that the disability figures are based on respondents' assessments of the disability quesion, i.e., Was some household member prevented from carrying out activities like working or housework? Whites may have been less likely than minority individuals to view their illness as disabling. On the other hand, most studies show that whites of all age groups tend to be healthier than minority individuals; therefore, whites in the sample may in fact have fewer disabilities. This interpretation is supported by the age distribution of the disabled in each ethnic group. Households with whites over 60 years of age are significantly less likely to report a disabled person (24 percent) than minority households (34 percent).

Respondents who indicated there was a disabled person in the household were asked about the person's need for and use of six services for the disabled: counseling about disability-related problems, vocational counseling, placement in special employment programs for the disabled, transportation, state certification of disability (which makes one eligible for vocational rehabilitation and other services) and Supplemental Security Insurance (SSI), the main form of financial assistance for the disabled.

The most needed services among the Hispanic disabled are disability-related counseling, state certification of disability, and financial assistance. Among blacks only a minority indicate need for a specific service, with the greatest proportion needing transportation services. Among whites counseling is the most needed service, with two-fifths of this group also reporting a need for transportation, certification of disability, and SSI. Employment related services appear as the relatively most unneeded. It is not immediately apparent why the Hispanic disabled have so little interest in transportation, while among blacks and whites this is seen as the most needed service. Some

possible explanations, which we will examine in the future, are differences in the number of persons living alone among the disabled in the three ethnic groups, and differences in the extent to which the elderly in each group have friends and relatives living nearby. Special transportation also appears to be the most difficult service to obtain in the area. Over 50 percent of the disabled who report needing transportation are unable to receive it.

About half of the Hispanic disabled need counseling for disability-related problems and state certification of disability. It is easier for Hispanics to receive counseling than it is to obtain certification. Three-fourths of Hispanics who need counseling obtain it, while half of those needing certification have not obtained it.

Employment-related services are reported to be relatively unneeded by all ethnic groups, but Hispanics who need this service are the least likely to obtain it. Among Hispanics needing vocational counseling, over one-third were unable to obtain it, while seven out of ten who needed placement in special employment programs were unable to obtain it.

Of all services for the disabled, the financial assistance offered by SSI is the most widely utilized. Hispanics are significantly more likely to require this service than blacks or whites, but this may be explained by differences between Hispanics and others in eligibility for SSI, and in the other groups' reliance on alternative sources of income, such as security and pensions not as readily available to Hispanics. Among those who needed SSI, the majority received it, but in this case Hispanics are more likely to receive it than blacks or whites.

Seven out of ten households needed at least one non-financial service, with Hispanic and white households needing more services than black households. If we include SSI among needed services, eight out of ten households needed services, with white and Hispanic households reporting more need than black households.

Substantial numbers of households among the three ethnic groups receive fewer services than needed. Examining non-financial services first, half of the households in each ethnic group: receive fewer services than needed. While white and Hispanic households with disabled people need more services than black households, the disabled blacks who need services receive fewer than the other two groups. For example, 42 percent of Hispanic households, 50 percent of white households, and 69 percent of black households receive fewer services, including SSI, than needed.

The Elderly

We asked about household members' need for and the use of five services for the elderly: geriatric services, counseling about problems of the elderly, recreation programs, visiting homemaker services, and financial assistance. Overall, financial assistance, recreation, and health services are the most needed, while few elderly report needing counseling and visiting homemakers. Relative to the disabled, the elderly who need services are more likely to receive them. This is especially the case with respect to services which the majority report needing. When we examine services needed by relatively few elderly – counseling and homecare, and to a certain extent, recreation – a higher proportion of these people do not receive them.

Hispanics and blacks are more likely than whites to report needs for health services, recreation, and financial assistance, but all three ethnic groups are equally unlikely to need recreation programs while Hispanics report greater need of financial assistance.

Among the elderly, the likelihood of receiving needed services cuts across ethnic lines. For example, 97 percent of the elderly in each group who report needing financial assistance receive it. Hispanic and black elderly are more likely than whites not to obtain counseling services, and white elderly are more likely than the other elderly to receive needed recreation programs. Among Hispanics and whites, a substantial percentage report not receiving needed visiting homemaker services, but relatively few report needing these services. In a future analysis, we will compare each ethnic group's utilization experiences with other indicators of need such as total household income and the existence of friends and relatives living nearby.

Half of the households with elderly members report needing at least one non-financial service, while seven out of ten households need services when we include financial assistance. Hispanic and black households are more likely than white households to need services. More than eight out of ten black and Hispanic households but only four out of ten white households report needing at least one service.

As a group, the elderly are more likely than other populations in the area to receive needed services. Overall, four out of five elderly persons report receiving all services needed. Moreover, inclusion of financial assistance in the summary data does not substantially improve the utilization pattern, as it does in the utilization profile of other service-eligible groups. For example, 21 percent of all households with an elderly person receive fewer non-financial services than needed, but the percentage is reduced to only 18 percent when we include financial assistance in the summary.

White households are the least likely and black households are the most likely to receive elderly services. Thus, while the majority of white households report not needing services, those who do are the least likely to receive them. Black and Hispanic housholds with elderly members, on the other hand, are more likely to need services, but also more likely to receive them. In this respect, Hispanic households underutilize services for the elderly more than black households, but less than white households.

Female Heads of Family

Female heads of family are among the most numerous of services-eligible residents in the Fordham-Tremont area. One-third of all households in the sample – 43 percent of Hispanic households, 29 percent of black, and 5 percent of white households – are headed by a female. While these differences are significant, it is probable that white female-headed households may have been undersampled. Because there are only 4 white female headed households in the sample, we report results only for black and Hispanic female heads of family.

We asked respondents in female headed families about their need for and the use of six services: job training, placement in the Work Incentive Program (WIN) (a job training and placement program for people receiving public assistance), adult education, parent-child counseling, day care, and public assistance.

The findings for this service population are interesting because of the notable rejection by the majority of women of services other than public assistance. In particular, it is startling to find that the majority of women do not report needing job related services, including day care and adult education. At the same time, the data show substantial underutilization among the minority of women needing job related services.

Hispanic women are equally as likely as black women to report needing employment-related services, but they are less likely to receive them. For example, 82 percent of Hispanic women who want job training did not receive it, while 57 percent of black women are in the same situation. Most women report not needing adult education, but Hispanic women are more likely than black women to need it. Since Hispanics are the lowest educated in the sample, and since a substantial number have problems with Engiish, it is surprising that so few report needing adult education. At the same time, it is noteworthy that large numbers of tnose wanting adult education do not receive it. It is also interesting to note that a sizable minority (one-fifth) of female heads of family do not receive public assistance.

The study found that one out of three female headed households need at least one non-financial service. If public assistance is added, almost nine out of ten households report needing services. Virtually identical proportions of black and Hispanic households need services.

Among households needing services, substantial numbers report receiving fewer services than needed. If we exclude public assistance, fully three-quarters in black and Hispanic households report receiving fewer non-financial services than needed. Even if we include public assistance, one-third of black and Hispanic households report receiving fewer services than needed.

The Unemployed

One-third of households in the sample have at least one unemployed person. We

exclude from this category female heads of family and people in school, regardless of age. Included are housewives, who are technically not considered unemployed but rather out of the labor force.

Like female heads of family, few unemployed people in our sample report a need for job related services. One-fifth of the unemployed report needing job training, but even fewer report needing CETA specifically. One in ten unemployed want adult education, and 35 percent want financial benefits.

Overall, Hispanics and blacks are equally as likely to want job-related services, and both are more likely to want them than whites. Among the relatively few who want job training, Hispanics are as likely as blacks to receive it. However, Hispanics who want adult education have more difficulties in receiving it than blacks. All three ethnic groups are equally likely to receive financial benefits for the unemployed, and only a small percentage were unable to receive them.

Overall, one-fifth of households report needing at least one non-financial service, and 45 percent report needing at least one service when we include financial assistance. Hispanics and blacks report needing more services than white households.

Hispanic households are less likely than black or white households to have their needs met. About 80 percent of Hispanic households report receiving fewer non-financial services than needed, while 56 percent report receiving fewer services than needed when we include financial assistance. Among black and white households, the numbers reporting a need for services is too small for computing use of services, but the percentages among these small bases are consistently below the percentage of Hispanic non-utilizers. For example, among black households, 30 percent report receiving fewer services than needed.

People with Emotional Problems

We identified households in which at least one member has emotional problems through two items: a household report and a 27-symptom mental health scale – the Demoralization Scale – administered to the respondent. Each item provides independent information about emotional problems in the household.

We asked questions about the use of mental health services to those who said "yes" when asked if any member of the household had had emotional problems in the last 12 months. Regardless of the answer to this question, all respondents were subsequently asked if any member of the household had used mental health facilities in the past 12 months. In all but a few cases, respondents' answers to these two questions were consistent.

To obtain a generalized measure of psychological distress, we administered to respondents the 27-point Demoralization Scale developed by Bruce Dohrenwend and Associates[2] out of the Psychiatric Epidemiology Research Instrument (PERI). The Demoralization Scale measures eight clusters of symptoms related to Frank's[3] definition of demoralization: **dread**, the fear of being unable to control one's own feelings; **self-esteem**, feeling of low self-worth; **hopelessness-helplessness**, the feeling that little in life is positive; **anxiety**, worry, restlessness, and tension; **confused thinking**, trouble in thinking or concentrating; **sadness**, feelings of depression and loneliness; **psychophysiological symptoms**, somatic manifestations of negative emotions; and **poor physical health**. The majority of items in the scale allow the respondent to choose between two negative states, two positive states, and one neutral one. For example, in the last item in the self-esteem cluster, the respondent is asked to answer the following statement, "In the past 12 months, how often have you felt confident?". The respondent's choices are "very often," "fairly often," "sometimes," "almost never," and "never". The last two answers are rated as symptomatic responses.

Hispanics have the highest number of symptomatic responses in all but one symptom cluster – poor self-esteem – where Hispanics and blacks have equal scores. Overall, Hispanics have a mean symptomatic score significantly (two symptoms) higher than blacks or whites. Thus, the results of the Demoralization Scale are consistent with the findings using the household report question: in either measure the proportion of Hispanics with emotional problems is higher than the proportion among blacks or whites.

While this data give us some clues to the degree of psychological distress experienced by the three ethnic groups, they do not tell us how to discriminate between mentally ill and healthy individuals. We do not yet know the number of symptomatic responses in the scale equivalent to clinical diagnosis of mental illness. We will consult research now being completed which will allow us to determine the breaking points in the scale equivalent to different degrees of psychological distress. As an interim measure, we use a score of nine or more symptoms – the mean number of symptoms among respondents in our sample who reported having emotional problems.

There was overlap between respondent's demoralization scores and their reports of emotional problems. People with a low score in the scale are very likely to report not having emotional problems, but among those with high demoralization scores, a high percentage report no emotional problems. Hispanics and blacks with high scores were less likely than whites to report emotional problems. Since those who reported no emotional problems were subsequently asked in a separate question about the use of mental health facilities (and in all but a few cases, reported not using them), the findings suggest that there are significant numbers of psychologically distressed minority residents in the area who have not made use of mental health facilities. This point is underscored when we look at respondents' needs for and the use of specific mental health services.

We asked those who reported emotional problems in the household about the use of five mental health services: hospitalization or inpatient services, outpatient services (community mental health centers or hospital outpatient services), private psychiatrists or psychotherapists, physicians, and preventive mental health programs. There is considerable preference among all ethnic groups for physicians and outpatient services in treating emotional problems. Fewer respondents preferred hospitalization or mental health programs. The rejection of inpatient treatment is understandable, given the fact that both patient and clinician see it as a treatment of last resort. Consequently, it is also understandable that among the few who reported needing inpatient treatment, the majority received it.

The number of blacks and whites reporting emotional problems is small, but they allow us to discern some ethnic differences in preferences for and use of different types of mental health services. Hispanics are significantly more likely than blacks or whites to report need for outpatient services, while whites are more likely than Hispanics or blacks to need private physicians. The majority of blacks, on the other hand, consistently report need for all mental health services examined.

Among the services, outpatient services, private therapy, and preventive programs are particularly underutilized. For example, one-third of those who reported needing private psychiatrists report not receiving that service. Physicians and in-patient services, on the other hand, are better utilized among those who report needing them. Hispanics who need these services are more likely to receive them than blacks or whites.

In contrast to the summaries of utilization for the other service-eligible groups, we modify the profiles here by including in the summary data two types of non-users: people who acknowledge having emotional problems but who use fewer services than stated as needed, and people with high demoralization scores (nine or more symptoms) who did not acknowledge having emotional problems.

Relatively few healthy respondents reported receiving or needing mental health services (fewer than 10 percent among each ethnic group). The majority of demoralized individuals did not use mental health services. Overall, only 20 percent of demoralized individuals report receiving as many mental health services as they needed, and

2. Dohrenwend, B.P.; Shout, P.E.; Egri, G.; and Mendelsohn, F.S. Non-Specific Measures of Psychological Distress and Other Dimensions of Psychopathology. *Archives of General Psychiatry* 37: 1229-1236, 1980 (November).

3. Frank, J.D. *Persuasion and Healing.* Baltimore: Johns Hopkins Press, 1961.

10 percent received some services but fewer than they reported needing. Overall, one fifth of demoralized respondents acknowledge having emotional problems but needing no services, while half report no emotional problems, and therefore do not seek mental health services. Thus, the majority of individuals in the area are not receiving needed mental health services. The clearest case of unterutilization is found among those who acknowledge emotional problems but report not receiving needed services. However, those who acknowledge mental health problems but report not needing services, and those who do not acknowledge mental health problems may also be said to underutilize services. The former may rely on other services.

There is substantial underutilization of mental health services by all ethnic groups in the area, but blacks significantly underutilize them more than whites or Hispanics. This suggests that demoralized blacks who acknowledge having emotional problems are less likely to use services than Hispanics or whites. Blacks also have significantly higher percentages than the other groups of individuals who acknowledge emotional problems but say they do not need mental health services. For all ethnic groups, underutilization decreased by about 10 percentage points if we include the use of physicians' services for treatment of emotional problems, but the relative position of each ethnic group remains the same.

Conclusions

Comparing the utilization of non-financial services in the five service-eligible groups, we find that three-fourths of female heads of family and the unemployed, half of the disabled, one-fifth of the elderly, and 15 percent of people reporting emotional problems receive fewer services than needed. However, if we include those with high demoralization scores not reporting emotional problems, over two-thirds of people with emotional problems are not receiving services. If financial services such as SSI and public assistance are included in the summaries, the utilization profile improves only among female heads of family among whom one-third receive fewer services than needed, and the unemployed, among whom half receive fewer services than needed.

Among Hispanics, three-fourths of female heads of family and the unemployed, half of the disabled, one-fourth of the elderly, and 16 percent of people reporting emotional problems received fewer services than needed. Among blacks, three-fourths of female heads of family, two-thirds of the disabled, 15 percent of those reporting emotional problems, and 8 percent of the elderly received fewer services than needed. The number of black households with unemployed needing services was too small for computing utilization. Among whites, half of the disabled, two-fifths of the elderly, and 15 percent of those reporting emotional problems received fewer services than needed. The number of white female heads of family and unemployed needing services was too small to compute utilization. Among Hispanics and blacks, one-half of people with high demoralization scores not reporting emotional problems may need mental health services that they are not receiving. Among whites, one-third are in the same situation. Taking all these types of services into account, Hispanics underutilize services for female heads of family and for the unemployed more than blacks or whites. Blacks underutilize services for the disabled more than the other ethnic groups, whites underutilize services for the elderly more than minorities. Using demoralization scores as a guideline, mental health services are the least underutilized, and minorities utilize such service less than white residents of the area.

The findings show that underutilization of services in the Bronx is specific to a given combination of ethnic group and type of services. Arguments about underutilization of mental health services by Hispanics or any other group cannot be assumed to apply automatically to the utilization of other types of services. The utilization experiences of a given group thus need to b examined service by service to arrive at a complete picture of the pattern of utilization of services by that ethnic group. At the same time, these findings underscore the necessity of comparing the utilization experiences of all ethnic groups before one can arrive at a meaningful assessment of a given group's utilization of services.

The findings also support the usefulness of including objective measures of need in analyzing the utilization of services. This report has introduced such a measure with respect to utilization of mental health services. In further analyses now under way, we will introduce measures of need to gauge underutilization of social services. We will attempt to establish more refined categories of service eligibility by deleting from the analysis categories not appropriate to a given service. For example, we will look at the utilization of services such as as day care after deleting from the base female heads of family who do not have children in day-care ages. By introducing such refinements of eligibility for specific services, we will be able to establish a more accurate pattern of utilization of services among the ethnic groups of the Fordham-Tremont area.

Taking these preliminary findings as a point of departure, our analysis is now focusing on those factors which determine utilization of services among Hispanics. In our analysis, we will test two competing theories of underutilization: alternative resources theory and barrier theory. The first theory hypothesizes that Hispanics unterutilize services because they rely on informal social organizations – the network of relatives, friends, and lay healers – for the solution of emotional problems and other problems of survival. Barrier theory, on the other hand, hypothesizes that Hispanics underutilize services because of acculturation problems, and because of characteristics of service provider agencies that do not accord with Hispanics' normative expectations about how one seeks and receives services. Our study includes indicators of these factors – acculturation, integration into informal and formal social networks, and perceptions of problems in dealing with local service agencies. Thus, our analysis will determine the extent to which these factors jointly and individually affect the ways in which Hispanics in the Fordham-Tremont area use mental health and social services.

INNOVATIVE THEORETICAL FORMULATIONS OF RELEVANCE TO CRITICAL TRANSITIONS IN FAMILY DEVELOPMENT

By Yvonne Martinez Ward,
Research Assistant,
Hispanic Research Center

On December 1, 1982 the Hispanic Research Center sponsored a seminar-workshop conducted by Reuben Hill, Regents Professor of Family Sociology at the Minnesota Family Study Center, on the critical stage transitions occurring within families as they move across the life cycle. The meeting was attended by professionals from diverse disciplines with an interest in the process of family adaptation and development as it undergoes internal change. Dr. Hill's presentation included (1) a theoretical overview on the stage development of the family within the life cycle, and (2) the operationalization of critical transitions or stressors likely to occur between each progressive stage. What follows will serve to highlight the major points within the two areas addressed by

Dr. Hill's lecture, emphasizing his unique theoretical perspective.

I. Overview: Perspectives on Family Stage Development

For years the life cycle has been characteristically described as a series of orderly changes, a journey from infancy to old age governed by the biological timetable or chronological aging.[1] Examples of orderly changes may include a child's entry into school, marriage of children, and the subsequent disengagement of children from their family of orientation. Life span developmentalists, as Dr. Hill poses, primarily focus on the "increasing differentiation of personality structures."[2] These structures include changes in cognitive abilities, skills, and social competencies. Maturation in these structures provokes changes in family organization and, in turn, changes in family organization impact on the development of the personalities of all family members. The orderly changes occurring in most families across the life cycle have been labeled "family time." Characteristic of family development over the life cycle is change in its function and structure relative to its life history.[3] Within the life cycle perspective, Dr. Hill considers such events as marriage and first parenthood not as independent variables, but as critical transitional points or developmental tasks. Such developmental tasks must be experienced to facilitate the development of the family and its members. Hill stresses, too, that the development of the family across the life cycle is principally determined by the family's responsiveness to the varying needs of each member. The family's priority in the developmental process, primarily, is to satisfy the needs of its own members; and, secondarily, those of significant other outside the family structure.

Although chronological age has been utilized in the life-cycle perspective as an indicator of experience and age-related changes, it may simply act as a marker to delineate the developmental sequence of stages and the rate at which the family travels through them. Chronological age also aids in outlining social expectations regarding appropriate role performance for family members. Dr. Hill points out another fundamental aspect of chronological age within the life-cycle perspective, namely, age as a marker of various rites of passage found within the familial developmental stages.

Dr. Hill's conceptual framework describes the family as a collective system structured in terms of roles, positions, norms, and role clusters.[4] Activities within the family are directional; that is, various tasks and familial resources function to attain the goals specified by the family. As the family travels through the life cycle, regularities in role sequences or careers of the various family members through the stages of development can be noted. To some extent the family acts as a closed system that becomes autonomous when dealing with topics which are specific to the family and guarded from the outside world. The family constitutes a system of adults and children experiencing various developmental stages. Dr. Hill recognizes that a family must exhibit continual adaptation to recurring life stressors in order for development to proceed. The life stressors are inherent within the orderly sequence of critical transitions within stages. The term "family career" has been used to describe the timing and scheduling of life-cycle changes and the total product of the careers of family members. As the family adapts to the stages within the life cycle, and consequently develops, the organization of the system is altered, thus impacting upon the personalities of its members.

The familial system operates under predetermined boundaries which subsequently gauge the family's interaction with society. Moreover, the family developmental perspective views the family as undergoing a multitude of changes. As the family changes over time, the number of participants, familial needs, and the competencies of family members also change. Dr. Hill is well aware of the fact that familial and individual role scripts are also constantly changing.

Age norms intrinsic to society and to the family act as "time markers" to determine the developmental sequences of the family. In other words, age serves the purpose of differentiating each stage and the developmental tasks intrinsic to each stage. With the use of developmental sequences the rhythm of a family's life cycle can be charted. The differentiation of stages is fundamental in marking "family time." The concept of family time pertains to the orderly changes in the life cycle which are universal to most families.[5] Certain markers are used as a way of charting behavioral changes within the family during stage differentiation. Some of these stage markers are: the age of the oldest child, age of the youngest child, and age of mother at first childbirth. Furthermore, division of the family life cycle into such categories as the stable expanding stage (child rearing), the stable empty nest stage (children leaving home), and the retirement years are theoretical breakdowns to determine the phase of development the family finds itself in. In other words, any major change within the family provides a reasonable indicator of family time.

Dr. Hill states that each developmental stage creates new demands on the family which precipitate new role reciprocities and role conflicts. The application of stage theory to the family enables researchers to catalogue the roles associated with positions in the family[6] and changes in role allocation from stage to stage. All patterns of family restructuring occurring within each stage are tied together to manifest the developmental process of the family. Each stage provides the rudiments of the upcoming stage and yet restricts the family to behaviors that fall within the particular stage. Dr. Hill brought to light the fact that, with each demarcating stage, new sets of norms, roles, and characteristics emerge which are mandatory if the family is to continue as a social system. However, it is possible for some families to become fixated within a particular stage. This is certainly a challenge to family therapists, whose task it is to assist the family in "busting loose" and resuming their journey into upcoming stages.

The stage notion of family development entails periods of continuity followed by transitional periods of discontinuity leading to renewed continuity arising from entry into the next stage. What this means is that the family is responding within a particular stage in a way that is expected and is specific to that stage. That stage is later interrupted by events which disrupt the family organization and create a "crisis" to be resolved. Once the family adapts its behaviors to the crisis encountered, it is ready to move into the next stage. Dr. Hill describes periods of discontinuity between stages as periods of critical transitions. Critical transitions have also been referred to in the developmental literature as "normative crises." These are experienced by all families as they pass through the life cycle. Dr. Hill defines a critical transition as an event occurring within the family which interrupts the previous stages, evoking a potential crisis and resulting in some form of adaptation which facilitates movement into the succeeding stages.[7] Such a theoretical perspective motivates empirical exploration of selective critical transitions or normative crises that occur between stages in most families.

II. Critical Transitions Formulating Family Developmental Stages

As the family moves from one stage to the next, new roles emerge, interpersonal relationships change, and the organization of the family is altered. It is during periods of transition that major adaptation to change occurs. Dr. Hill notes that once the family has travelled past a critical transition point it can never return to an earlier stage. It is clear that the developmental process of the family is unidirectional.

Dr. Hill presents three models of stage development to illustrate family time in the developmental process, namely, (a) stage-discrete development, (b) stage-transitional development, and (c) the stage-transitional branching process. Within the first model, family developmental change is characterized by a series of discontinuous, qualitatively different steps. Critical transition points are de-emphasized within this perspective. In contrast, stages are de-emphasized and transitions are given major emphasis within the stage-transitional model. The key to developmental change in this model lies in the transition points. Finally, the stage-transitional branching process is a dynamic model, incorporating aspects of the

first two models. Dr. Hill equates this model to a roller coaster with the family falling into periods of chaos (transitional points), forcing re-definition of the situation and resulting in developmental growth. The changes resulting from critical transitional periods act to restore equilibrium within the family. There is a parallel here to Jean Piaget's view of cognitive development, wherein cognitive change results from accommodation to environmental experiences that initially cannot be understood. Finally, the stage-transitional branching process serves as a viable framework under which family stress theorists can intervene in the family developmental process.

Dr. Hill has attempted to refine the concept of critical transitions through a modification of Rapoport's idea of family normative crises. Briefly, Rapoport[8] outlined events which he considered to act as normative crises and which occur in the majority of families. These included (1) the crisis of getting married, (2) the crisis of first parenthood, (3) the crisis of deparentalization when parents must relinquish their hold over the children and allow them to develop independently, and (4) the crisis of retirement and disengagement from a position of leadership (the empty nest stage). The latter is also referred to as the launching process.

Similar to Rapoport's normative crises are Dr. Hill's sequences of critical transitions. His conception of critical transitions is based on family life-event theory and stress theory as well as Rapoport's formulations. Presented below are seven critical transitions identified by Dr. Hill which have a stressful impact on the family: (1) getting married, (2) first parenthood, (3) transactional relations, (4) disengagement, (5) launching of children, (6) grandparenthood and (7) retirement. During the first critical transition, disengagement from siblings and relatives, leaving parents and taking on marital status may result in stress. Within the second transition, first parenthood entails the addition of an infant member, possibly leaving the labor force (specific to the wife), reactivation of the kinship network (i.e., grandparents, aunts, uncles) and assuming the parental status. During the third transition possible stressors and/or role changes may include the entry of the oldest child into school thus necessitating the establishment of relations with school and neighbors, the birth of the youngest child, residential changes for the accommodation of the growing children's needs, and a change in the family network from open to close-knit. The fourth transition or disengagement may bring about changes in the oldest child's peer orientation, as the youngest child enters school and the mother re-enters the labor force or returns to school. During the launching process or the fifth transition, for example, the oldest child may leave school and become part of the labor force, get married and leave home. Moreover, the youngest child may shift orientation from parents to peers, and parents may begin to play the role of in-laws. The sixth transition or grandparenthood assumes retirement from parenthood and taking on roles of grandparenthood. The last transition or retirement brings about an overall reduction in many roles. Both husband and wife retire from the labor force, lose their leadership positions, and close boundaries by disengagement. There may also be residential status changes. The couples may become apartment renters or nursing home residents. Based upon the above critical transitions, Dr. Hill has developed a numerical family stress index, which reflects both the total number of transitions experienced within the family and the degree of stress at the point of assessment.

Dr. Hill's theoretical orientation and innovative comceptualizations generated much commentary. One question raised at the meeting pertained to the notion of disorganization within the family as a result of experiencing a critical transition period. Dr. Hill responded that any major change made by a key incumbent within the family structure will, undoubtedly, have repercussions for the rest of the family members. An example of a major change might be when a woman who has occupied the roles of full-time mother and wife decides to re-enter the labor force. Such a decision generates shock waves which are felt by other family members as they must each assume increased responsibilities to compensate for the absence of the female. Without doubt, adaptation is also necessary in situations where a family member leaves home to attend college or to join the armed forces. What Dr. Hill seems to convey is that even the role of an infant, insignificant as it may seem, impacts upon all other family members.

Dr. Hill makes very clear in his lecture that the family should be viewed as a collection of role sequences which are altered as the family travels through the life cycle. His unique critical transitions theory is an attempt not only to view the family as a cluster of individuals with unique personalities, but also to highlight and provide a research framework for the cohesive social matrix of the family.

REFERENCES

1. Neugarten, B.L. and Datan, N. Sociological Perspectives on the Life Cycle. In P.B. Baltes and K.W. Schaie (eds.), *Life-Span Developmental Psychology: Personality and Socialization.* New York: Academic Press, 1973.

2. Hill, R. Mattessich, P. Family Development and Life-Span Development. In P.B. Baltes (ed.), *Life-Span Development and Behavior,* Vol. 2. New York: Academic Press, 1979.

3. Hill and Mattessich, *op. cit.*, Note 2.

4-7. *Ibid.*

8. Rapoport, R. Normal Crises, Family Structure, and Mental Health. *Family Process* 1963, 2 (1): 68-80.

HISPANIC RESEARCH CENTER: RESEARCH BULLETIN

The HRC is directed by Dr. Lloyd H. Rogler, Albert Schweitzer Professor in Humanities at Fordham University.

The HRC operates under a research grant (2 POI MH 30569-06A1) from the Minority Group Center of the National Institute of Mental Health. The *Research Bulletin* invites comments and new items from its readers. Let us know what topics you would like to see in future issues. Address correspondence to:

Stasia Madrigal, Editor, Hispanic Research Center, Fordham University, Thebaud Hall, Bronx, New York 10458. Telephone: (212) 579-2630.

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